

# FEC FORM 2

## STATEMENT OF CANDIDACY

|  |                           |   |   |  |
|--|---------------------------|---|---|--|
| 1. (a) Name of Candidate (in full)<br>RICHARD B NUGENT |                           |   | 2. Identification Number<br>H0FL05139   |  |
| (b) Address (number and street)<br>PO BOX 15668        |                           |   | <input type="checkbox"/> Check if address changed   |  |
| (c) City, State and ZIP Code<br>BROOKSVILLE FL 34604   |                           |   | 3. Is This Statement <input checked="" type="checkbox"/> New (N) <b>OR</b> <input type="checkbox"/> Amended (A) |  |
| 4. Party Affiliation<br>REPUBLICAN PARTY               | 5. Office Sought<br>House | 6. State & District of Candidate<br>FL 05 |   |  |

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

|   |  |  |
|---|--|--|
| (a) Name of Committee (in full)<br>FRIENDS OF RICH NUGENT |  |  |
| (b) Address (number and street)<br>P. O. Box 15668        |  |  |
| (c) City, State and ZIP Code<br>Brooksville FL 34604      |  |  |

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

|                                 |
|---------------------------------|
| (a) Name of Committee (in full) |
| (b) Address (number and street) |
| (c) City, State and ZIP Code    |

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

|  |                    |
|--|--------------------|
| Signature of Candidate<br>RICHARD B NUGENT | Date<br>02/02/2011 |
|--|--------------------|

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|